

I do not remember that *molluscum contagiosum* has been observed in cattle in Europe.—I am etc.,  
Harley Street, W., Feb. 15th. T. COLCOTT FOX.

#### FINSEN'S TREATMENT OF LUPUS.

SIR,—My attention has been called to a popular article, "Science in British Hospitals," appearing in the February number of the *World's Work*. Speaking of the Finsen method of treating lupus the writer says, "No other method can approach this for cosmetic results. Even the *x* rays, when successful, leave a most unsightly and prominent scar. This light leaves nothing recognizable as scar tissue. Finsen will soon have made extensive cases of lupus as rare as Lister has made the surgical fevers or Jenner small-pox."

This, Sir, is the kind of writing which one expects from the enthusiastic layman, but it is somewhat disconcerting to find this particular author to be a medical man. The passage teems with inaccuracy, as any one who has had experience of this class of work will know. The *x* rays, when successful, leave results which cosmetically compare very favourably with any other plan. Scar tissue is always recognizable to some extent even after Finsen's method has been employed. Finally, the gifted and modest author of the Finsen method would himself be the last to claim such extravagant praise for his discovery—a discovery which has proved a most valued addition to our armamentarium, but which perhaps finds its limitations most of all in dealing with "extensive cases."—I am, etc.,

Manchester, Feb. 6th.

G. H. LANCASHIRE.

#### THE URBAN HOSPITAL TREATMENT OF EXTERNAL OR SURGICAL TUBERCULOSIS.

SIR,—Since the year 1898 we have in Liverpool been driving home the very points concerning which Mr. A. H. Tubby has so ably written in the *BRITISH MEDICAL JOURNAL* of February 21st, with reference to the treatment of children suffering from surgical tuberculosis, and in the *JOURNAL* of November 11th, 1899, and August 17th, 1901, you were good enough to refer to the work done in the Liverpool Country Hospital for chronic diseases of children. There are many conditions besides surgical tuberculosis, however, requiring prolonged, uninterrupted, and active treatment in the fresh air of the country, and the Liverpool Hospital has been founded on comprehensive lines which permit of its dealing with every case, whether medical or surgical, which requires the conditions referred to by Mr. Tubby.

The work of the Liverpool Country Hospital will soon be greatly extended, and a building capable of accommodating 200 children will ultimately be erected at Heswall, where a site comprising nine acres of land has been secured for the purpose.—I am, etc.,

Liverpool, Feb. 23rd.

CHARLES J. MACALISTER.

#### THE POSITION AND PROSPECTS OF THE MEDICAL PROFESSION.

SIR,—I read with pleasure your report of the able and outspoken address given by Dr. Charles Gibson before the Harrogate Medical Society. We are so accustomed to having the prospects and present position of the profession represented to the public in glowing and optimistic terms that it is refreshing to have the other side of the picture also held up to view. I cannot ask for sufficient space to deal, even summarily, with the many important points to which Dr. Gibson refers, but I should like to dwell for a moment on his remarks on over-competition and the danger of a lowering of the status of the profession. Every medical man must be aware that for years past the influx into the ranks of the profession has been steadily outgrowing the legitimate demand for its members' services.

In London especially the multiplication of medical men has been proceeding at a rate which would be ludicrous if it were not also more than a little pathetic. It must be borne in mind in this connexion that the demand for medical advice cannot be considered to grow proportionately to the increase of population. With the improvement of sanitation and the general dissemination of hygienic and elementary medical knowledge the requirements of the public from a professional point of view are showing a steady tendency to decrease, and are likely to do so to a still greater extent in the near future.

In what way, then, can the ever-growing increase in our already overcrowded ranks be checked? Dr. Gibson has made some suggestions which well deserve serious considera-

tion; but I should like to add that, in my opinion, this evil can only be adequately combated by enabling students and prospective students to obtain a fuller and clearer insight into the conditions, financial, social, and general, which prevail in the profession than they can now in most cases procure.

If fuller details were provided of the emoluments, duties, requirements, and necessary qualifications of the various branches of medical work, candidates would be in a better position to gauge their suitability for a medical career; and those who decided to take the plunge would at least do so with a clear perception of the true facts of the case. I trust that some of your readers may be able to make practical suggestions as to the many important points raised in Dr. Gibson's address, as I feel that those of us who have achieved some degree of success in our vocation will be doing a good work in endeavouring to obviate some of the dangers which, as he has ably pointed out, are likely to threaten the welfare of the profession in the not distant future.—I am, etc.,

Alexander Square, S.W., Feb. 16th.

DENNIS VINRACE.

#### TRANSPLANTATION OF PANCREAS IN DIABETES, AND OF SUPRARENAL GLAND IN ADDISON'S DISEASE.

SIR,—Can any of your readers inform me if cases of diabetes have been treated by implanting the pancreatic gland of an animal into the patient? I have at present in my wards a case of diabetes mellitus of the "bad" type—that is, it does not respond to dietetic treatment like the mild or "gouty" type of the disease. We have not been able to get rid of the sugar by medicines or dieting, and as regards the latter, we are afraid to exclude the carbohydrates too rigorously lest we should induce diabetic coma.

I need not enter into details of the case at present, but would put the problem in this way: We cannot get rid of the sugar by drugs or dieting; the man cannot remain in the hospital for an indefinite period, and if he is dismissed he will not be able to get special treatment outside or take much care of himself, for he is a poor working man. Under these circumstances I have requested that the transplantation of pancreas shall be tried in his case. I have based my request on the following grounds:

In some cases of diabetes the pancreas is found diseased. Experiments by Minkowsky and others have shown that extirpation of the pancreas in animals gives rise to glycosuria. And the remarkable fact has been established by experiment that if the extirpation of the pancreas is preceded by the implantation of another animal's pancreas no glycosuria results.

Now it may be argued that I have not proved that my patient's pancreas is diseased, and we know that diabetes is due to other causes than diseased pancreas. But, admitting this, the fact remains that the implanting of pancreas before the extirpation of an animal's own pancreas prevents the development of glycosuria, which points to the view of Lépine, namely, that the pancreas produces a sugar-destroying substance, which is not contained in the ordinary pancreatic secretion which flows into the duodenum but may possibly be absorbed from the gland itself. By implanting pancreas we might get a bigger supply of this sugar-destroying substance, which would be helpful in cases when the patient's pancreas was normal but unequal to the task of coping with the surplus sugar in diabetes.

I understand that thyroid gland has been implanted in cretin children with good results. Might we not expect a similar beneficial result by implanting pancreas in diabetes? Weighing all things, I consider that the experiment should be tried in a case which otherwise seems beyond cure, and is always more or less in danger.

Again, I should like to ask if any of your readers can tell me if the suprarenals have been transplanted into cases of Addison's disease? If this has not been done, I certainly think the experiment is not only justifiable, but strongly to be recommended.—I am, etc.,

JAMES W. ALLAN, M.B., C.M.

February 16th.

Physician, Glasgow Royal Infirmary.

#### MIDWIVES FOR COUNTRY DISTRICTS.

SIR,—The minds of Mrs. Johnstone and her friend the clergyman seem considerably exercised respecting the prospective working of the Midwives Act. While sympathizing to the full in her laudable intent to provide skilled attendance for parturient women, it may be as well to point out that her scheme with its appeal, as it stands, to medical practitioners